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Bib Data Sheet

CONFIRMATION NO. 8279

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|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER 10/814,948 | FILING DATE 03/30/2004 RULE | CLASS 358 | GROUP ART UNIT 2624 | ATTORNEY DOCKET NO. 20412-08341 |
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APPLICANTS

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** CONTINUING DATA

ok kp

This appln claims benefit of 60/506,206 09/25/2003
 and claims benefit of 60/506,263 09/25/2003
 and claims benefit of 60/506,302 09/25/2003
 and claims benefit of 60/506,303 09/25/2003
 and claims benefit of 60/506,411 09/25/2003

** FOREIGN APPLICATIONS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/08/2004

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|--|-----------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 6 | TOTAL CLAIMS 67 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature <i>kp</i> | Initials | | |

ADDRESS

00758
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TITLE

Networked printing system having embedded functionality for printing time-based media

☐ All Fees

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|--|--|--|---|--|--|--------------------------------------|---------------------------------|
| FILING FEE RECEIVED 1616 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <table border="1"><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table> | <input type="checkbox"/> 1.16 Fees (Filing) | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | <input type="checkbox"/> 1.18 Fees (Issue) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
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